SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivers in the second seco	COMPLETE THIS SECTION ON DELIVERY	
item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.  Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature  X  B. Received by ( Printed Name)	☐ Agent ☐ Address C. Date of Delive
Alberto Gonzales	D. Is delivery address different from iten     If YES, enter delivery address below	n 1? ☐ Yes v: ☐ No
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2. Article Number (Transfer from service label)	4. Restricted Delivery? (Extra Fee)	☐ Yes
S Form 3811, February 2004 Domestic Return		